

TFW 262/1



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner: P. M. Phu

{W:\04303\100n151us1\00457275.DOC [REDACTED]}

Attorney Docket No.: 04303/100N151-US1

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. _____ in an envelope addressed to: _____

EV 441164279 *as*

**MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

on June 23, 2005
Date

D. Stantini

Signature

Signature
A. Stanton

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Summary Sheet (1 page)

Fee Transmittal (1 page)

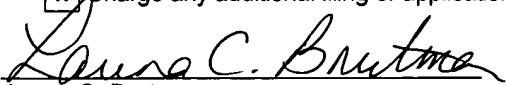
Check No. 8996 in the amount of \$800.00

Amendment Transmittal (1 page)

Amendment in Response to Non-Final Office Action (21 pages)

Return Receipt Postcard



AMENDMENT TRANSMITTAL LETTER				Docket No. 04303/100N151-US1	
Application No. 09/751,783-Conf. #8764		Filing Date December 29, 2000		Examiner P. M. Phu	
				Art Unit 2631	
Applicant(s): Ravi Subramanian					
Invention: A CONFIGURABLE ALL-DIGIT COHERENT DEMODULATOR SYSTEM FOR SPREAD SPECTRUM APPLICATIONS					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	60	- 63 =		x	
Independent Claims	16	- 12 =	4	x 200.00	800.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					800.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$ <u>800.00</u> to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Laura C. Brutman Attorney Reg. No.: 38,395				Dated: <u>June 23, 2005</u>	
DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7664					
Express Mail Label No. _____ Dated: _____					